



NATIONAL CONFERENCE *of* STATE LEGISLATURES
The Forum for America's Ideas

**STATE-LEVEL DATA ON NET BUDGET IMPACT OF MEDICAID ELIGIBILITY
PROVISIONS IN THE AMERICA'S HEALTHY FUTURE ACT**

Using data from the U.S. Department of Health and Human Services, the Urban Institute, Kaiser Family Foundation and the Congressional Budget Office (CBO), Senate Finance Committee Democratic Staff released new estimates of state-by-state impact of provisions in the America's Healthy Future Act that expand Medicaid, reform and expand the Children's Health Insurance Program (CHIP) and increase prescription drug rebates in the Medicaid program. The methodologies used in tabulation of this data are not available. For ease of use NCSL has formatted this material into individual state charts. There is no additional impact information available at this time, but as data is available it will be added to this document.

Alabama

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
68.0	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
395,108	232,885	213,142	19,743	1,147,624	25.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
14,274	-38	248	1.7%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
14,274	139	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
14,274	68.0%	21	53	80	92	99	107	452	3.2%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
30,304	68.0%	273	668	1,023	1,173	1,254	1,363	5,754	19.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
4	15	19	19	13	14	16	17	18	18	151

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
14,274	192	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Alaska

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.5	87.8	86.8	85.8	84.8	83.8	82.8

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
40,398	24,565	21,570	2,995	141,250	21.1%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
5,234	-9	124	2.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
5,234	97	1.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
5,234	50.5%	9	22	36	43	49	55	214	4.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
5,346	50.5%	43	105	159	181	191	206	886	16.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	3	4	4	3	3	4	4	4	4	36

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
5,234	152	-2.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Arizona

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
65.8	93.1	94.1	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Arizona is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
77,730	100,222	36,811	63,411	1,202,524	9.1%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
32,736	-1	308	0.9%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
32,736	150	0.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
32,736	65.8%	22	53	81	93	99	108	455	1.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
62,899	65.8%	69	171	263	301	322	350	1,477	2.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
0	0	0	0	0	0	0	0	0	0	3

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
32,736	294	-0.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Arkansas

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
72.8	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
355,163	194,168	186,534	7,634	814,562	31.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
10,797	-22	495	4.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
10,797	220	2.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
10,797	72.8%	28	69	106	122	130	141	596	5.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
28,912	72.8%	453	1,110	1,699	1,948	2,084	2,266	9,561	33.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	8	11	11	7	8	9	10	10	10	87

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
10,797	270	-2.5%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

California

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
3,014,651	1,683,279	1,447,247	236,032	8,454,301	24.9%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
227,151	-355	3,699	1.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
227,151	2,205	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
227,151	50.0%	271	695	1,112	1,331	1,483	1,677	6,569	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
227,151	50.0%	1,238	3,002	4,547	5,158	5,458	5,868	25,272	11.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
39	138	178	178	118	128	148	158	168	168	1,422

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
227,151	3,654	-1.6%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Colorado

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
443,134	237,088	221,553	15,535	658,431	56.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
18,448	-31	785	4.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
18,448	140	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
18,448	50.0%	41	106	171	207	233	265	1,022	5.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
18,448	50.0%	227	551	834	945	1,000	1,074	4,631	52.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	12	15	15	10	11	13	14	15	15	124

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
18,448	253	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Connecticut

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
184,626	101,327	88,573	12,754	597,145	20.4%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
25,515	-28	411	1.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
25,515	234	0.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
25,515	50.0%	27	68	109	131	147	166	648	2.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
25,515	50.0%	126	305	462	525	555	597	2,570	10.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	11	14	14	9	10	12	13	13	13	114

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
25,515	357	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Delaware

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	77.3	78.3	79.3	80.3	81.3	82.3

* Based on 2009 FMAP

Delaware is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
15,187	13,378	7,355	6,024	209,887	6.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)

State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings

Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
6,783	-11	40	0.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
6,783	45	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
6,783	50.0%	6	15	22	25	27	28	123	1.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
6,783	50.0%	11	28	44	50	54	60	248	3.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	4	6	6	4	4	5	5	5	5	45

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
6,783	83	-1.2%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

District of Columbia

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
70.0	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

The District of Columbia is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
42,377	22,389	20,278	2,110	183,960	13.9%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
5,156	-7	-10	-0.2%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
5,156	22	0.4%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
5,156	70.0%	2	6	9	10	11	11	48	0.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
12,032	70.0%	29	71	108	124	133	144	609	5.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	3	4	4	2	3	3	3	3	3	29

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
5,156	52	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Florida

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
55.4	92.7	91.7	90.7	89.7	88.7	87.7

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
1,880,571	991,276	916,027	75,249	3,757,431	35.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)

State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings

Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
79,681	-106	1,200	1.5%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
79,681	806	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
79,681	55.4%	85	226	375	463	531	616	2,295	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
98,976	55.4%	750	1,819	2,755	3,125	3,308	3,557	15,314	15.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
12	41	53	53	35	38	44	47	50	50	424

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
79,681	1,477	-1.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Georgia

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
94.5	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
983,048	545,269	499,084	46,184	2,281,285	31.4%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
30,117	-43	787	2.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
30,117	459	1.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
30,117	64.5%	48	117	179	205	219	238	1,006	3.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
54,696	64.5%	581	1,423	2,178	2,498	2,672	2,905	12,257	22.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
5	17	22	22	14	16	18	19	21	21	174

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
30,117	504	-1.7%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Hawaii

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
55.1	82.4	83.4	84.4	85.4	86.4	87.4

* Based on 2009 FMAP

Hawaii is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
16,255	14,079	4,995	9,084	183,416	8.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)

State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings

Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
6,635	-8	29	0.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
6,635	79	1.2%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
6,635	55.1%	5	13	20	23	24	26	111	1.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
8,145	55.1%	10	25	38	44	47	52	215	2.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	3	4	4	3	3	3	4	4	4	32

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
6,635	130	-2.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Idaho

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
69.8	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
140,923	73,582	69,360	4,221	306,226	31.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
4,478	-8	87	1.9

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
4,478	67	1.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
4,478	69.8%	6	15	23	27	29	31	132	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
10,336	69.8%	91	222	340	390	417	453	1,912	18.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	3	4	4	3	3	3	3	4	4	31

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
4,478	81	-1.8%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Illinois

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.3	87.6	86.6	85.6	84.6	83.6	82.6

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
959,467	524,383	462,660	61,723	2,274,807	30.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
70,965	-135	1,334	1.9%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
70,965	649	0.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
70,965	50.3%	105	270	435	522	584	662	2,578	3.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
71,880	50.3%	520	1,262	1,910	2,167	2,292	2,464	10,615	14.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
15	52	67	67	45	49	56	60	64	64	540

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
70,965	1,353	-1.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Indiana

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
64.3	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
545,014	287,472	267,767	19,706	1,170,982	32.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
23,457	-31	308	1.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
23,457	190	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
23,457	64.3%	23	57	88	101	108	117	494	2.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
42,175	64.3%	306	749	1,147	1,315	1,407	1,529	6,454	15.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	12	16	16	10	11	16	14	15	15	125

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
23,457	251	-1.1%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Iowa

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
62.6	95.0	95.0	95.0	95.0	95.0	94.9

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
217,839	116,462	105,179	11,284	549,176	26.9%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
12,320	-23	56	0.5%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
12,320	100	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
12,320	62.6%	10	26	39	45	48	53	222	1.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
20,640	62.6%	118	290	444	509	544	591	2,496	12.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	9	12	12	8	8	10	10	11	11	93

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
12,320	173	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Kansas

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
60.1	95.0	95.0	95.0	94.4	93.4	92.4

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
240,166	126,570	117,706	8,864	482,211	35.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
10,616	-14	145	1.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
10,616	79	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
10,616	60.1%	9	23	35	44	52	63	226	2.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
15,977	60.1%	117	287	439	501	530	570	2,445	15.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	5	7	7	5	5	6	6	7	7	56

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
10,616	104	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Kentucky

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
70.1	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
378,048	208,520	192,899	15,621	970,472	27.4%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
16,611	-43	274	1.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
16,611	124	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
16,611	70.1%	23	57	87	99	106	116	488	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
38,999	70.1%	314	769	1,177	1,350	1,444	1,569	6,622	17.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
5	17	21	21	14	15	18	19	20	20	170

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
16,611	168	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Louisiana

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
71.3	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
534,728	287,059	270,130	16,928	1,195,838	31.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
20,310	-69	66	0.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
20,310	134	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
20,310	71.3%	18	43	66	76	81	88	371	1.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
50,482	71.3%	257	631	965	1,107	1,184	1,287	5,432	10.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
8	27	34	34	23	25	29	31	33	33	276

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
20,310	163	-0.8%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Maine

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
64.4	91.7	92.7	93.7	94.7	95.0	95.0

* Based on 2009 FMAP

Maine is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
66,408	34,954	32,307	2,647	381,995	10.1%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
9,488	-16	-121	-1.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
9,488	89	0.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
9,488	64.4%	6	14	19	19	20	22	99	1.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
17,171	64.4%	53	131	203	235	252	274	1,148	6.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	6	8	8	5	6	7	7	8	8	66

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
9,488	244	-2.6%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Maryland

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	77.3	78.3	79.3	80.3	81.3	82.3

* Based on 2009 FMAP

Maryland is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
490,108	256,656	229,032	27,624	913,774	39.1%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)

State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings

Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
34,526	-32	1,769	5.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
34,526	432	1.3%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
34,526	50.0%	103	244	359	397	408	425	1,936	5.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
34,526	50.0%	299	741	1,147	1,331	1,440	1,583	6,541	18.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
4	13	16	16	11	12	13	14	15	15	129

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
34,526	470	-1.4%

Source: Data on the estimated costs of Medicaid populations > 133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Massachusetts

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	77.3	78.3	79.3	80.3	81.3	82.3

* Based on 2009 FMAP

Massachusetts is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
0	52,239	0	52,239	3,614,971	1.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
67,224	-71	-37	-0.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
67,224	514	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
67,224	50.0%	29	72	111	127	136	147	622	0.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
67,224	50.0%	29	72	111	127	136	147	622	0.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
8	28	36	36	24	26	30	32	34	34	285

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
67,224	888	-1.3%

Source: Data on the estimated costs of Medicaid populations > 133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Michigan

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
60.3	100.0	100.0	100.0	100.0	100.0	92.6

* Based on 2009 FMAP

Michigan is a "High-need" state-A state which has total Medicaid enrollment below the national average for Medicaid enrollment as a percent of state population and has a seasonally-adjusted unemployment rate greater than 12% for August 2009.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
756,827	396,415	360,486	35,929	1,992,976	24.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
43,054	-73	-70	-0.2%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
43,054	346	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
43,054	60.3%	15	36	56	64	68	214	454	1.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
65,312	60.3%	398	976	1,494	1,713	1,833	1,853	8,267	12.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
8	28	36	36	24	26	30	32	34	34	291

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
43,054	578	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Minnesota

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	77.3	78.3	79.3	80.3	81.3	82.3

* Based on 2009 FMAP

Minnesota is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
311,167	185,226	147,387	37,840	760,068	32.2%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
41,775	-31	631	1.5%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
41,775	291	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
41,775	50.0%	60	143	213	236	245	258	1,155	2.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
41,775	50.0%	152	377	584	677	732	804	3,327	8.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	12	15	15	10	11	13	14	14	14	123

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
41,775	693	-1.7%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Mississippi

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
75.8	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
338,865	175,565	162,401	13,164	896,851	24.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
10,801	-21	163	1.5%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
10,801	115	1.1%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
10,801	75.8%	13	33	50	57	61	66	280	2.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
33,905	75.8%	193	473	724	830	888	965	4,074	12.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	8	11	11	7	8	9	9	10	10	85

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
10,801	147	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Missouri

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
63.2	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
465,913	248,725	217,420	31,306	1,352,901	22.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
28,302	-64	236	0.8%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
28,302	300	1.1%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
28,302	63.2%	27	67	103	118	126	137	578	2.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
48,585	63.2%	277	678	1,038	1,190	1,273	1,384	5,839	12.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
7	25	32	32	21	23	27	29	30	30	257

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
28,302	385	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Montana

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
68.0	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
94,377	50,310	46,090	4,220	191,175	35.7%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
3,014	-5	84	2.8%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
3,014	44	1.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
3,014	68.0%	6	14	21	24	26	28	120	4.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
6,417	68.0%	73	178	272	312	334	363	1,530	23.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	2	3	3	2	2	2	2	2	2	20

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
3,014	60	-2.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Nebraska

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
59.5	95.0	95.0	94.8	93.8	92.8	91.8

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
136,429	70,181	65,911	4,270	317,267	28.4%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
7,465	-19	47	0.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
7,465	99	1.3%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
7,465	59.5%	6	15	23	30	35	42	150	2.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
10,985	59.5%	77	189	289	328	348	374	1,606	14.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	7	10	10	6	7	8	9	9	9	77

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
7,465	125	-1.7%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Nevada

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	100.0	100.0	100.0	100.0	100.0	82.3

* Based on 2009 FMAP

Nevada is a "High-need" state-A state which has total Medicaid enrollment below the national average for Medicaid enrollment as a percent of state population and has a seasonally-adjusted unemployment rate greater than 12% for August 2009.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
236,579	121,807	111,691	10,116	318,996	61.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
7,558	-11	124	1.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
7,558	68	0.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
7,558	50.0%	5	12	19	21	23	122	201	2.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
7,558	50.0%	114	280	429	492	526	475	2,315	30.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	4	6	6	4	4	5	5	5	5	44

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
7,558	101	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

New Hampshire

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
83,028	42,941	37,816	5,126	133,206	47.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
6,263	-9	136	2.2%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
6,263	61	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
6,263	50.0%	7	19	30	36	40	45	177	2.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
6,263	50.0%	35	85	128	145	154	165	712	11.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	4	5	5	3	3	4	4	4	4	38

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
6,263	64	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

New Jersey

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
618,089	370,793	313,121	57,672	1,275,636	41.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
48,002	-79	1,495	3.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
48,002	347	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
48,002	50.0%	77	198	316	378	420	474	1,863	3.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
48,002	50.0%	340	825	1,249	1,417	1,500	1,613	6,944	14.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
9	31	39	39	26	28	33	35	37	37	314

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
48,002	402	-0.8%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

New Mexico

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
70.9	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
223,261	128,031	118,951	9,079	561,744	29.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
10,928	-2	241	2.2%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
10,928	148	1.4%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
10,928	70.9%	14	35	53	61	65	71	298	2.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
26,599	70.9%	196	481	736	844	903	982	4,143	15.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
0	1	1	1	1	1	1	1	1	1	6

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
10,928	198	-1.8%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

New York

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	77.3	78.3	79.3	80.3	81.3	82.3

* Based on 2009 FMAP

New York is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
256,946	303,480	117,670	158,810	4,621,002	7.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
271,854	-498	-986	-0.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
271,854	1,381	0.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
271,854	50.0%	148	360	545	619	655	705	3,032	1.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
271,854	50.0%	228	562	866	999	1,075	1,176	4,905	1.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
55	194	249	249	166	180	208	222	235	235	1,994

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
271,854	3,405	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

North Carolina

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
64.6	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
904,305	493,435	488,555	44,880	1,877,992	35.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
42,092	-101	592	1.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
42,092	315	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
42,092	64.6%	58	141	216	248	265	288	1,216	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
76,812	64.6%	684	1,677	2,567	2,943	3,148	3,422	14,441	18.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
11	39	50	50	34	36	42	45	48	48	402

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
42,092	536	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

North Dakota

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
93.2	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
44,174	23,512	21,550	1,962	85,586	37.9%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
2,348	-3	15	0.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
2,348	4	0.2%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
2,348	63.2%	2	4	7	8	8	9	38	1.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
4,023	63.2%	22	54	82	94	101	110	463	11.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
0	1	2	2	1	1	1	1	2	2	13

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
2,348	14	-0.6%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Ohio

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
62.1	95.0	95.0	95.0	95.0	95.0	94.4

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
781,979	436,053	388,448	47,606	2,215,780	24.5%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
55,493	-67	541	1.0%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
55,493	281	0.5%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
55,493	62.1%	43	106	162	185	198	228	922	1.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
91,082	62.1%	459	1,124	1,721	1,973	2,111	2,282	9,671	10.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
7	26	34	34	22	24	28	30	32	32	269

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
55,493	394	-0.7%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Oklahoma

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
65.9	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
391,641	217,949	193,738	24,211	766,240	39.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
15,283	-31	363	2.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
15,283	167	1.1%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
15,283	65.9%	25	61	93	106	114	124	522	3.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
29,536	65.9%	276	676	1,035	1,187	1,270	1,380	5,832	19.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	12	15	15	10	11	13	14	14	14	123

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
15,283	204	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Oregon

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
62.5	100.0	100.0	100.0	100.0	100.0	94.8

* Based on 2009 FMAP

Oregon is a "High-need" state-A state which has total Medicaid enrollment below the national average for Medicaid enrollment as a percent of state population and has a seasonally-adjusted unemployment rate greater than 12% for August 2009.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
50,506	70,059	22,954	47,105	547,797	14.7%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
14,402	-16	301	2.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
14,402	113	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
14,402	62.5%	20	48	73	84	90	104	419	2.9%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
23,952	62.5%	58	142	217	249	266	283	1,214	5.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	6	8	8	5	6	7	7	8	8	65

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
14,402	166	-1.2%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Pennsylvania

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
54.5	81.8	82.8	83.8	84.8	85.8	86.8

* Based on 2009 FMAP

Pennsylvania is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
818,390	432,101	375,899	56,202	2,162,897	25.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
85,767	-42	1,776	2.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
85,767	758	0.9%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
85,767	54.5%	121	284	417	458	467	484	2,231	2.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
102,815	54.5%	436	1,079	1,670	1,935	2,093	2,299	9,511	9.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
5	16	21	21	13	14	18	19	20	20	170

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
85,767	1,043	-1.2%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Rhode Island

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
52.6	100.0	100.0	100.0	100.0	100.0	84.9

* Based on 2009 FMAP

Rhode Island is a "High-need" state-A state which has total Medicaid enrollment below the national average for Medicaid enrollment as a percent of state population and has a seasonally-adjusted unemployment rate greater than 12% for August 2009.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
50,089	28,345	23,467	4,878	259,112	12.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
9,381	-9	-85	-0.9%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
9,381	96	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
9,381	52.6%	3	8	12	13	14	39	89%	0.9

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
10,406	52.6%	35	85	130	149	160	150	710	6.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	3	4	4	3	3	4	4	4	4	34

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
9,381	235	-2.5%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

South Carolina

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
70.1	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
390,058	221,559	211,300	10,260	1,055,361	26.6%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
14,729	-32	237	1.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
14,729	85	0.6%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
14,729	70.1%	19	47	37	83	89	97	408	2.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
34,482	70.1%	295	722	1,106	1,268	1,356	1,474	6,222	18.0%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
4	13	16	16	11	12	13	14	15	15	129

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
14,729	126	-0.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

South Dakota

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
62.6	95.0	95.0	95.0	95.0	95.0	94.9

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
51,294	27,634	25,902	1,732	142,552	24.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
2,985	-5	24	0.8%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
2,985	30	1.0%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
2,985	62.6%	2	6	9	10	11	12	50	1.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
4,986	62.6%	31	76	117	134	143	155	656	13.2%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	2	2	2	2	2	2	2	2	2	20

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
2,985	36	-1.2%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Tennessee

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
64.3	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
171,277	113,413	76,876	36,536	1,324,598	9.4%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
29,992	-70	-17	-0.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
29,992	173	0.6%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
29,992	64.3%	20	49	75	86	92	100	420	1.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
53,973	64.3%	114	279	427	489	523	569	2,400	4.4%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
8	27	35	35	23	25	29	31	33	33	282

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
29,992	328	-1.1%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Texas

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
59.4	95.0	95.0	94.7	93.7	92.7	91.7

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
3,099,960	1,669,607	1,554,318	115,289	5,024,125	49.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
102,804	-188	2,892	2.8%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
102,804	860	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
102,804	59.4%	151	369	584	750	889	1,060	3,803	3.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
150,657	59.4%	1,871	4,584	6,998	7,943	8,411	9,048	38,855	25.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
21	73	94	94	63	68	78	83	89	89	751

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
102,804	1,020	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Utah

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
70.7	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
240,698	122,194	112,316	9,878	458,612	36.3%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
5,311	-13	95	1.8%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
5,311	72	1.4%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
5,311	70.7%	9	23	35	40	43	47	198	3.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
12,822	70.7%	125	307	470	539	577	627	2,646	20.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	5	6	6	4	5	5	6	6	6	52

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
5,311	123	-2.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Vermont

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
59.5	86.8	87.8	88.8	89.8	90.8	91.8

* Based on 2009 FMAP

Vermont is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
0	5,723	0	5,723	149,040	4.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
5,475	-11	-80	-1.5%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
5,475	69	1.3%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
5,475	59.5%	2	4	6	7	8	8	36	0.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
8,026	59.5%	2	6	9	11	11	12	52	0.6%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	4	6	6	4	4	5	5	5	5	46

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
5,475	138	-2.5%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Virginia

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	85.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
617,116	328,826	307,821	21,005	1,096,583	42.8%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
31,875	-30	1,288	4.0%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
31,875	239	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
31,875	50.0%	59	154	249	302	340	387	1,491	4.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
31,875	50.0%	333	807	1,221	1,384	1,464	1,573	6,781	21.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
3	12	15	15	10	11	13	14	14	14	122

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
31,875	321	-1.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Washington

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
50.9	78.2	79.2	80.2	81.2	82.2	83.2

* Based on 2009 FMAP

Washington is an expansion state-a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
11,562	81,103	4,587	76,516	1,129,683	7.7%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
36,741	-52	210	0.6%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
36,741	514	1.4%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
36,741	50.9%	30	73	112	128	127	148	627	1.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
38,148	50.9%	33	81	124	142	152	166	698	1.8%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
6	20	26	26	17	19	22	23	24	24	207

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
36,741	724	-2.0%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

West Virginia

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
73.795.0	95.0	95.0	95.0	95.0	95.0	95.0

* Based on 2009 FMAP

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL , For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
195,945	108,492	103,370	5,122	421,173	34.7%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
7,002	-22	77	1.1%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
7,002	49	0.7%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
7,002	73.7%	8	21	32	36	39	42	178	2.5%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
19,651	73.7%	132	323	494	567	606	659	2,780	14.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
2	8	11	11	7	8	9	10	10	10	87

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
7,002	63	-0.9%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Wisconsin

Medicaid FMAP for Newly Eligible (Percentage)

Original FMAP*	2014	2015	2016	2017	2018	2019
59.4	86.7	87.7	88.7	89.7	90.7	91.7

* Based on 2009 FMAP

Wisconsin is an expansion state—a state with coverage of parents and childless adults at or above 100% of the FPL that is not based on employer or employment. Such coverage may be less comprehensive than Medicaid, but must be more than premium assistance, hospital-only benefits, or health savings accounts.

Eligibility and Enrollment Estimates

Increase in Eligibility for All People over 133% FPL, For Years 2014-2019

Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
324,177	180,936	158,028	22,909	1,128,229	19.1%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
23,587	-35	80	0.3%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)

Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
23,587	131	0.6%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019

Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
23,587	59.4%	23	52	76	82	82	83	398	1.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)

Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
34,481	59.4%	112	277	428	496	536	589	2,439	7.1%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)

2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
4	13	17	17	12	12	14	15	16	16	138

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)

Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
23,587	311	-1.3%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)

Wyoming

Medicaid FMAP for Newly Eligible (Percentage)						
Original FMAP*	2014	2015	2016	2017	2018	2019
50.0	87.3	86.3	95.3	84.3	83.3	82.3

* Based on 2009 FMAP

Eligibility and Enrollment Estimates Increase in Eligibility for All People over 133% FPL , For Years 2014-2019					
Newly Eligible	Newly Enrolled	Newly Enrolled Newly Eligible	Newly Enrolled Previously Eligible	Total Enrolled	Change From 2019 Baseline
39,049	19,218	18,045	1,174	81,245	31.0%

Source: Urban Institute. This is the projected gross enrollment increase. It does not take into account (a) reduction in optional coverage > 133% FPL; (b) shifting of CHIP to the exchange.

State Spending 2010-2019 (millions)	State Spending Net of (1) Cost of Medicaid Expansion, (2) Savings from Reduced Optional Coverage>133% FPL, (3) Reduced Chip Spending; and (4) Medicaid Drug Savings		
Medicaid Baseline Spending	3-Year State Spending (2010-2012)	10-Year State Spending (2010-2019)	Change from Baseline (2010-2019)
2,998	-5	43	1.4%

Source: SFC Democratic staff estimates from HHS and the Urban Institute, state data from Kaiser Family Foundation, and CBO

State Medicaid Costs: CHIP Wrap Around Costs (2010-2019) (million)		
Medicaid Baseline Spending (2010-2019)	Wrap Around Coverage Costs	Change From Baseline
2,998	25	0.8%

Source Urban Institute. Assumes that the state cost of the wrap-around = 25% of current spending.

Change in State Spending 2014-2019									
Medicaid Baseline Spending ¹	Chairman's Mark: 27.3-32.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. AP for "High-Need" states (2014-2018).								
	Original FMAP	State Spending (2014)	State Spending (2015)	State Spending (2016)	State Spending (2017)	State Spending (2018)	State Spending (2019)	Total State Spending (\$)	Change from Baseline (%)
2,998	50.0%	3	7	12	14	16	18	70	2.3%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

Change in Federal Spending 2014-2019 (million)									
Chairman's Mark: 27.3 % point increase for "Expansion" states and 37.3-32.3 % point increase for "Other" states (2014-2019). FMAP capped at 95%. 100% FMAP for "High-Need" states (2014-2018).									
Federal Medicaid Baseline Spending ¹	Original FMAP	Federal Spending (2014)	Federal Spending (2015)	Federal Spending (2016)	Federal Spending (2017)	Federal Spending (2018)	Federal Spending (2019)	Total Federal Spending (\$)	Change from Baseline (%)
2,998	50.0%	16	38	58	66	69	75	322	10.7%

¹ Urban Institute: Projections are calculated by applying estimated growth rates for the benefit categories from CBO's March 2009 baseline projections of federal Medicaid outlays to the states' share of actual total spending in 2008 calculated using the CMS-64 Medicaid Financial Management Report data and the 2008 FMAP values. 2010 FMAP values are then used to estimate the state's share in each projected year. State savings reflects the difference between the states' share under the baseline scenario (2010 FMAP) and states' share under the alternative FMAP scenarios. Costs include DSH or administrative costs.

State Savings from Medicaid Drug Policies in Health Reform Prior to Full Implementation: FY 2010-2019 (millions)										
2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Cumulative
1	2	2	2	2	2	2	2	2	2	18

Source CBOs estimate Federal Savings using approximately a 57/43 Federal/state split. Allocated by state by using Medicaid drug spending by state from KFF statehealthfacts.org

State Medicaid Savings: optional Coverage Populations Above 133% FPL (millions)		
Medicaid Baseline Spending	State Savings from Optional Coverage Savings: Families (2013-2019)	Change in Baseline
2,998	33	-1.4%

Source: Data on the estimated costs of Medicaid populations>133% FPL plus cost of eliminating CHIP from the Urban Institute. Includes only the cost of parents and children (not childless adults)